PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

016907/1167

CLAIMS AS FILED - PART I (Column 1) (mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			15					ATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			15 minus 20=		*		X	\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			Ø minus 3 =		* 5		Х	40=		OR	X80=	400
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+1	35=		OR	+270=	
* If	the difference	less than ze	ss than zero, enter "0" in co			TC	TAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II								,		•	OTHER	
_		(Column 1) CLAIMS		(Colu		(Column 3)	SM	IALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	1	REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T CLAIM	=	X	40=		OR	X80=	
<u></u>	THOTTHESE	TOTAL	JETH LE DEI	LIVELIV	I OLANI		+1	35=		OR	+270=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											ADDIT. I EEI	
AMENOMENT B	1	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .	X	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X.	40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JETIPLE DEP	ENDEN	I CLAIM		+1	35=		OR	+270=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C	Torres in the	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X	 10=			X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	LE DEPENDENT CLAIM			 	-		OR		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pa					found in	the app	ropriate box	in col	umn 1.	i